

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Lawrence J. Wrass

Application No.: 10/814,391

Group No.: 3635

Filed: 03/31/2004

Examiner: J.E. CHAPMAN

For: SELF SUPPORTIVE PANEL SYSTEM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is a Response and Amendment and a copy of a previously filed Revocation of Prior Power of Attorney and New Power of Attorney (12.1.05) and Supplemental IDS for this application.

STATUS

2. Applicant is other than a small entity.

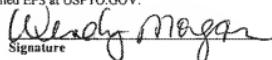
EXTENSION OF TERM

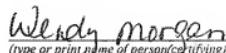
3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

CERTIFICATION OF TRANSMISSION

I hereby certify that, on the date shown below, this correspondence is being filed EFS at USPTO.GOV:

Date: 11-30-2006


Signature


(type or print name of person certifying)

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

| (Col. 1) CLAIMS REMAINING AFTER AMENDMENT | (Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR | (Col. 3) PRESENT EXTRA | OTHER THAN A SMALL ENTITY | | |
|---|---|------------------------------|---------------------------|-------------------------------------|----------------|
| TOTAL | 16 | 20 | = | 0 | x |
| INDEP. | 3 | 3 | = | 0 | x |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | \$ 50.00 | = |
| | | | | \$ 200.00 | = |
| | | | | \$ 0.00 | \$ 0.00 |
| | | | | TOTAL ADDITIONAL FEE | \$ 0.00 |

No additional fee for claims is required.

TOTAL FEE(S) DUE

5. The total fee(s) due is/are:

| | |
|----------------------|----------|
| Supplemental IDS Fee | \$180.00 |
| Total Fee(s) Due: | \$180.00 |

PAYMENT OF FEE(S) DUE

6. Please pay the fee(s) for this application as follows:

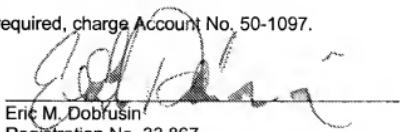
Please charge Deposit Account 50-1097 the sum of \$180.00.

FEE DEFICIENCY

7. If an additional extension and/or fee is required, charge Account No. 50-1097.

If an additional fee for claims is required, charge Account No. 50-1097.

Date: December 21, 2006


Eric M. Dobrusin
Registration No. 33,867
DOBRUSIN & THENNISCH PC
29 W. Lawrence Street, Ste. 210
Pontiac, MI 48342
248-292-2920
Customer No. 25215